

STRUM NURSING HOME

P. O. BOX 9

STRUM 54770 Phone: (715) 695-2611

Operated from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/01): 38

Total Licensed Bed Capacity (12/31/01): 50

Number of Residents on 12/31/01: 37

Ownership:

Highest Level License:

Operate in Conjunction with CBRF? No

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? Yes

Average Daily Census: 37

Corporation

Skilled

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		29.7
Supp. Home Care-Personal Care	No					1 - 4 Years		43.2
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years		27.0
Day Services	No	Mental Illness (Org./Psy)	21.6	65 - 74	2.7			-----
Respite Care	Yes	Mental Illness (Other)	32.4	75 - 84	35.1			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	51.4	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	2.7	95 & Over	10.8	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	Yes	Fractures	0.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	2.7	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	13.5		-----	RNs		9.3
Referral Service	No	Diabetes	2.7	Sex	%	LPNs		9.5
Other Services	No	Respiratory	2.7		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	21.6	Male	27.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	73.0			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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## Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	0	0.0	0	23	88.5	96	0	0.0	0	11	100.0	98	0	0.0	0	0	0.0	0	34	91.9
Intermediate	---	---	---	3	11.5	79	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	8.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		26	100.0		0	0.0		11	100.0		0	0.0		0	0.0		37	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	45.5	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	0.0	62.2	37.8	37
Other Nursing Homes	45.5	Dressing	21.6	45.9	32.4	37
Acute Care Hospitals	9.1	Transferring	24.3	48.6	27.0	37
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	32.4	43.2	24.3	37
Rehabilitation Hospitals	0.0	Eating	73.0	18.9	8.1	37
Other Locations	0.0	*****				
Total Number of Admissions	11	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	5.4	Receiving Respiratory Care		5.4
Private Home/No Home Health	0.0	Occ/Freq. Incontinent of Bladder	45.9	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	8.3	Occ/Freq. Incontinent of Bowel	35.1	Receiving Suctioning		0.0
Other Nursing Homes	8.3			Receiving Ostomy Care		0.0
Acute Care Hospitals	25.0	Mobility		Receiving Tube Feeding		5.4
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	5.4	Receiving Mechanically Altered Diets		29.7
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care		Other Resident Characteristics		
Deaths	58.3	With Pressure Sores	0.0	Have Advance Directives		97.3
Total Number of Discharges		With Rashes	10.8	Medications		
(Including Deaths)	12			Receiving Psychoactive Drugs		45.9

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Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

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	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	74.0	80.3	0.92	85.1	0.87	84.4	0.88	84.6	0.87
Current Residents from In-County	89.2	72.7	1.23	72.2	1.24	75.4	1.18	77.0	1.16
Admissions from In-County, Still Residing	63.6	18.3	3.47	20.8	3.06	22.1	2.88	20.8	3.06
Admissions/Average Daily Census	29.7	139.0	0.21	111.7	0.27	118.1	0.25	128.9	0.23
Discharges/Average Daily Census	32.4	139.3	0.23	112.2	0.29	118.3	0.27	130.0	0.25
Discharges To Private Residence/Average Daily Census	2.7	58.4	0.05	42.8	0.06	46.1	0.06	52.8	0.05
Residents Receiving Skilled Care	91.9	91.2	1.01	91.3	1.01	91.6	1.00	85.3	1.08
Residents Aged 65 and Older	100	96.0	1.04	93.6	1.07	94.2	1.06	87.5	1.14
Title 19 (Medicaid) Funded Residents	70.3	72.1	0.97	67.0	1.05	69.7	1.01	68.7	1.02
Private Pay Funded Residents	29.7	18.5	1.60	23.5	1.27	21.2	1.40	22.0	1.35
Developmentally Disabled Residents	0.0	1.0	0.00	0.9	0.00	0.8	0.00	7.6	0.00
Mentally Ill Residents	54.1	36.3	1.49	41.0	1.32	39.5	1.37	33.8	1.60
General Medical Service Residents	21.6	16.8	1.29	16.1	1.34	16.2	1.33	19.4	1.11
Impaired ADL (Mean)	48.6	46.6	1.04	48.7	1.00	48.5	1.00	49.3	0.99
Psychological Problems	45.9	47.8	0.96	50.2	0.92	50.0	0.92	51.9	0.89
Nursing Care Required (Mean)	6.4	7.1	0.90	7.3	0.88	7.0	0.91	7.3	0.87